

DELTA CHARTER TOWNSHIP BUILDING DEPARTMENT

◆ 7710 W. Saginaw ◆ Lansing, Michigan 48917 ◆ (517) 323-8530 ◆

www.township.delta.mi.us

BUILDING PERMIT APPLICATION

ALL ITEMS SHALL BE FILLED OUT

BUILDING PERMIT NUMBER _____

I. JOB LOCATION

Date _____

Name of Owner/Agent		Phone Number
Street Address & Job Location		
Lot/Section Number	Subdivision	

II. CONTRACTOR / AGENT NAME

<input type="checkbox"/> Contractor Name <input type="checkbox"/> Agent Name		
License Number	Expiration Date	
Address (Street No. and Name)		
City	State	Zip Code
Telephone Number	Fax Telephone Number	
E-mail Address	Social Security Number	
Federal Employer ID Number (or reason for exemption)		
Workers Comp. Insurance Carrier (or reason for exemption)		
MESC Employer Number (or reason for exemption)		
Electrical Contractor:		
Mechanical Contractor:		
Plumbing Contractor:		

III. TYPE OF JOB

<input type="checkbox"/> Residential	<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Remodel
<input type="checkbox"/> Commercial	<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Remodel
<input type="checkbox"/> Other (Description of Work) _____ _____			

IV. APPLICANT AFFIDAVIT

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

V. APPLICANT SIGNATURE

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subjected to civil fines.

Signature of Applicant	Date
Application Approved By	Date

Zoning	Lot size			
Yard set backs				

Utilities	Public Water <input type="checkbox"/>	Public Sewer <input type="checkbox"/>
Septic Permit No.		Well Permit No.
County Driveway Permit Number		
Capital Sewer Chg.	Capital Water Chg.	Sewer Main Chg.
Heating Type	Nat <input type="checkbox"/> Propane <input type="checkbox"/>	Fireplace <input type="checkbox"/>

No. Bed Rooms/Unit	No. Bath Rooms/Unit
--------------------	---------------------

FLOOR AREA: (Sq. Ft.)	Basement
First Floor	Second Floor
Third Floor	Fourth Floor
Fifth Floor	Garage Area

Estimated Value of Construction

Exclusive of Lot \$ _____

TOTAL PERMIT FEE \$ _____

Receipt No. _____ Date _____

GENERAL: Work shall not be started until the application for permit has been filed. All installations shall be in conformance with the Building Code. **No work shall be concealed until it has been inspected.** When ready for an inspection, call the inspector providing as much advance notice as possible. The inspector will need the **job location** and **permit number**.

EXPIRATION OF PERMIT: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work. **A PERMIT WILL BE CANCELLED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REFUNDED OR REINSTATED.**